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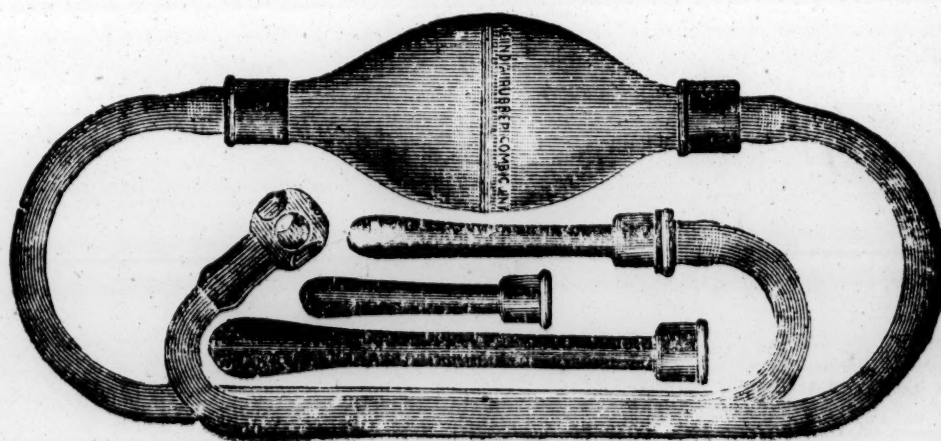


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NOTICE TO CONTRIBUTORS.—Write on one side of the paper only. Write plain When you wish to begin a paragraph at a given word, place before it in your MS the sign ¶. Words to be printed in *italics* should be underscored once, in SMALL CAPITALS twice, in LARGE CAPITALS three times.

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Hahnemann's Doctrine of Dynamization.

BY WM. BOERICKE, M. D., San Francisco.

It seems to me that the Eclectic School is singularly favorably situated to look upon Hahnemann's teachings fairly and objectively, being saved from the blind prejudice characteristic of the old school, and equally removed from the subjective attitude almost necessary with us Homœopaths, that of too ready acceptance of Hahnemann's theories, seeing, as we do, the remarkable practical results of their application. And while it is true that none of his *theories* have been proved, yet, we believe to be justified in asserting that whatever Hahnemann promulgated as a *fact*, has been repeatedly verified to be a fact. For instance, not one of his brilliant generalizations about the action of drugs or

the more definite guiding symptoms have been found wanting when applied to practice, but not one of his theories, the Psora theory, Dynamization theory, Dosage and etc., has been able to obtain more than a partial endorsement, and before the homoeopathic school as a whole, stands, "not proven."

Among Hahnemann's teachings, his doctrine of Dynamization stands pre-eminent as the one furthest removed from the conception of the modern physician. It has led to the most radical pharmaceutical procedures and to the most extravagant posological notions and practice. Here at posology is the point where theory and speculation and ridicule have met and done their utmost to, befog the investigator endeavoring to arrive at precise facts. But though the theory may be wholly fallacious, it has proved to be an excellent working hypothesis, and there can be no doubt that it has been instrumental in bringing to light some remarkable medicines and making us acquainted with effective dosage of drugs hitherto undreamed of in the attenuated extent reached.

The comparative smaller dose of a medicine chosen homoeopathically over one selected in order to *produce* its known physiological effects is a logical necessity, for the homoeopathic remedy, acting as it does, on tissues diseased, needs not to combat the natural resistance of the body, which is present in healthy tissues and organs, and must first be overcome. Though at first Hahnemann prescribed the usual doses (Ipecac 5 gr., Nux 4 gr., Cinchona Bark 1-2 Drs.) he soon found that aggravation would follow such dosage, if they were chosen according to the similar relationship. This led him naturally enough to a reduction of dosage and as he obtained equally good or better results he kept on decreasing, and it seems to me that it is human nature and scientific curiosity to see just how far this sub-division can go, and so he kept it up until he reached the dizzy heights

of the decillionth attenuation. The mere reduction of the dose did not justify any such extreme attenuation, the first two or three degrees of dilution would answer all practical purposes; but Hahnemann believed to find that the therapeutic action was augmented in most all medicines by this process, and actually developed in others, wholly inert in their crude forms. This is true of *Lycopodium*, *Sepia*, *Natrum mur.*, etc..

These facts necessitated to Hahnemann's philosophical mind some explanation, and vitalist that he was, he sought it in the realms beyond actual material substance, as we know it, and placed all medicinal action in a *spirit-like* force, whatever that may be.

Since he looked upon all disease as but a disturbed condition of the vital force, and this far removed from the grossness of matter, it followed that for purposes of affecting curatively this suffering life-force—this disturbed dynamis—a dynamized drug, one from which all crude, gross, material parts have been eliminated, would be required. Hence the following teachings in his *Organon*: "Healing remedies can and actually do restore health and vital harmony only by virtue of their dynamic action upon the vital force;" and again, he speaks of "the spirit-like power concealed in drugs," etc.. Each drug, according to Hahnemann, possesses a curative force, peculiar and individual and distinctive, that can be fixed permanently to either alcohol or sugar of milk, or other medicinally inert substance. A drug, as we perceive it, as we handle it, is the ultimate embodiment of a medicinal force, and Hahnemann discovered a method, possibly the only practical method, of securing this inner, living medicinal force, by dissolving away, if you please, its outer material envelope. Singularly enough this again was only a re-discovery, for way back in the middle ages the identical doctrine was taught by some of the alchemists.

Hahnemann conceived the centesimal scale 1:99 to atten-

uate his medicines. He carried the process up to the 30th degree and taught that this was the proper dose. The human mind fails to grasp the extent of this subdivision. From the point of view of materialistic science, there is nothing rational or reasonable or sane about the proposition. *If it be the material particles* of a drug that act, this 30th potency is a delusion. Yet there can be no doubt among those who have actually experimented with these preparations that this 30th potency possesses distinct and unmistakable powers. Try it with Conium, Salt, Silicea, Lycopodium, Sulphur, etc. Use them according to the indications in this attenuated form, and you will be convinced that you are dealing with forces hitherto undreamed of. I have repeatedly seen a hard tumor, something that can be outlined, felt, and measured, disappear after a few months' treatment with Conium 30th. What did it? The material particles of Conium? Impossible, there were none in that preparation, for modern science places the 12th potency as most likely the limit that can possibly contain a stray molecule of the original drug. What other explanation is there, if it be not the dynamic principle, the inner living Conium force, that peculiar and distinctive entity akin to that which, every spring, embodies itself in leaf and stem and flower, by means of which material envelope we recognize it as the Hemlock of our botany.

And so it is with every drug, be it plant or mineral or animal product. By attenuation, new powers hitherto latent, are developed, or new forces set free. Inert substances, like Quartz, Charcoal, etc.; articles of consumption, like Table Salt, are made thereby into medicines of immense power, and of wide scope. However repulsive to our common sense this doctrine of Dynamization may be, it is a natural scientific fact, easily verified by any one, constantly verified and illustrated by Homœopathy for nearly 75 years.

I am well aware of the usual explanation of the power of

small doses by attributing it to the extent of the active surfaces of the drug and not to the size of the mass.

"The actual medicinal force of a drug is in proportion to the number of medicinal atoms made superficial or free for contact or absorption." Molecular science has so far advanced that it seems practicable to estimate approximately the size of the ultimate atoms of matter and according to this, it would seem that our 12th potency carried us to the limit, beyond which the presence of any atoms of matter whatever must become increasingly doubtful.

I see no escape from the Hahnemannian position, taking it for granted that potencies above the 12th do indeed manifest action, that it is not the material envelope of the drug at all that cures when it is selected according to its homœopathicity, but the medicinal force within this, and that the process of trituration and potentization practically sets this force free and is imparted to an inert substance like water, sugar of milk, or alcohol.

Homœopathy does not recognize drugs other than as dynamic agents. Only as such are they really curative. Only as such ought or can they be successfully employed according to the law *Similia Similibus Curantur*.

This is not saying that we do not make use of the physical, chemical, or so-called physiological action of drugs, but when we do, we are taking advantage of that knowledge of drugs outside of the domain of homœopathy, with which every physician, independent of his therapeutical tendencies, is supposed to be equipped. Your own gifted author, Professor Webster, in his *Principles of Medicine* denies that trituration adds anything to the drug except the advantage of divisibility, and adds that the old homœopaths believed that every turn of the pestle imparted a new property to the agent, etc. Of course this doctrine is scouted by the great majority of the homœopathic school now-a-days, but has the iconoclastic tendency of modern times anything more tangible to offer in its place?

The Non-Surgical or Medical Treatment of Piles.

By JOHN FEARN, M. D., OAKLAND, California.

First let no one take me for an opponent to the surgical treatment of piles in every case. On the contrary, I believe there is a large percentage of chronic piles—especially where absolute rest cannot be obtained—where surgery offers the only speedy and permanent cure. But my theme is to be entirely extra-surgical.

Let us first look at what can be done by local means in the case of acute piles when they are external, large, and angry. If the patient has stamina sufficient to stand the cold water treatment, there is nothing that will give greater relief; if the patient be seated in a cold sitz bath and kept there a reasonable time, the terrible burning and suffering is relieved at once. He may then have a cold compress applied, and be placed in bed. In the worst case I ever saw I had the patient take the cold sitz bath every two or three hours; the relief was prompt, and he had no more trouble for years, and then only as the result of neglecting the laws of health. The colder the application can be borne the better.

Some who cannot stand the cold sitz bath can use the cold sponge bath, sitting over a pail or bowl, and with a large sponge, apply freely the cold water to the part. The sense of relief and comfort coming from this treatment, can only be appreciated by those who have tried it, and by its use inflammation is abated, blood clots are relaxed and absorbed, and atonic conditions are removed; and if ever after the sufferer would use cold water as a detergent after each evacuation, as well as every night on retiring, the business of the rectal specialist would suffer materially.

In case of old chronic piles, where there is a lax state of the sphincters, where the mucous membrane is much hypertrophied, and there is much redundancy of tissues at the

anal outlet, great advantage may be gained by spraying the parts with cold water twice a day—useing the spray apparatus connected with the usual city bath tub. If the patient will not submit to the knife, this cold spray in my opinion offers the next best curative help in such cases.

But suppose the patient cannot bear the cold water treatment? With the same condition of pain and inflammation as before described, we may have recourse to hot applications; use the hot sitz bath frequently; after the bath, anoint the parts freely with an unguent made from the leaves and tops of *Calendula Officinalis*, *Geranium*, and *Datura Stramonium*, useing vaseline as an excipient; then apply a hot pack to the parts, covering this with a dry cloth, and envelop the buttocks with rubber cloth to keep the bed clean and dry, the pack to be changed every three hours. Some use poultices—I prefer the pack as it is more cleanly and equally efficient. This course will remove pain and inflammation, but it is not tonic and astringent like the cold water. The ointment can be used by a rectal syringe to medicate not only the external parts, but also the internal, and it will be found a grand adjuvant in the treatment of internal piles.

A few words about the posture treatment—my friend and collaborator on this subject, Dr. Church, says it was man's pride which led him to assume the erect position, and because of this erect position he suffers with these hemorrhoidal tumors. I will not dispute the opinion of my venerable friend. As for this deponent, I am too young to remember the time when man was anything but a biped.

But if the doctor be right—then surely the posture treatment in piles, especially acute, external piles, must be very good, for we once more make the patient a quadruped and put him on all fours. The *modus operandi* is this—the patient is put on the bed in the knee-chest position, the head being lowered, the hips being raised, and the body supported in this position by cushions, etc.. In this position the pressure on the column of blood in the iliac veins is completely

relieved, thus effectually, for the time being, relieving piles of the inferior hemorrhoidal plexus.

Dr. Burnett, a Homœopathic physician of London, England, has written a very readable book on the treatment of diseases of the veins. He is an opponent of surgery in hæmorrhoids, and gives in his book, cases from practice showing the great advantage of posture in the treatment of piles, though I cannot agree with him in condemning the knife altogether. Yet I can speak highly of the posture treatment. It seems eminently sensible, and at the same time puts the patient in the best possible position to have the piles medicated.

Now for the medicinal remedies. I remember the time when if I had *Spec. Juglans* and *Spec. Collinsonia* with *Glycerine* at hand, I thought I was ready for any case of piles. But much as I prize these remedies, I now know that they will only fit certain cases.

First let me say, I believe that piles can be treated successfully according to the general principles of Specific Medication. To illustrate—if I were treating a case where there was a small, frequent pulse with exaltation of temperature, whatever else I might give, I should certainly prescribe aconite; and so with all our well-known specific medicines.

But to come to individual remedies. Suppose we have a case of acute piles, that are protruding, hot and painful, and there is constipation. In this case, we will give magnesia sulphate, grains five, in water every two hours, using the approved local measures.

By this means constipation will be relieved, and the temperature will come down. We chose this remedy because of its power to relieve vascular congestion; it does not largely increase peristaltic action, neither does it increase glandular secretion, but the watery stools produced by it are directly drawn from the vascular supplies, therefore relieving blood pressure, burning, and discomfort.

Collinsonia—Take the case of mixed piles where there is a sensation as of a foreign body in the rectum, with constriction of the sphincters, where there is congestion and inertia of the lower bowel, and consequent constipation, *Collinsonia* is a grand remedy. Our Homœopathic friends also use it for above indications, expecting this remedy not only to relieve rectal congestion but also constipation. I think it better in this case to use *Collinsonia* and *Juglans Cinera* together, the combination overcomes portal congestion, constipation and relieves irritation, and atony of the whole gastro-intestinal tract.

Æsculus Hypocastinum is suited to cases when there is pronounced constipation, much pain, but very little bleeding. In poisonous doses it has the reputation of producing portal congestion resulting in catarrhal inflammation of the colon and rectum, the parts being dry and painful. This gives us the key to its field of usefulness. It may in these cases be used as an unguent applied locally, and in half drop doses of specific medicine internally, and it will give brilliant results.

Hammamelis is the remedy in bleeding piles. In this case there is seldom constipation; there is frequently diarrhœa, and a general tendency to varicosis. It relieves not merely the bleeding but the enfeebled venous condition, the cause of bleeding. Use the specific, two drop doses frequently repeated, also apply it topically as a lotion.

Aloes in its own sphere is one of the best remedies in this disease, when specifically indicated. This is the case where we have portal and pelvic congestion, especially in women; the piles protrude; there is much congestion, burning and severe tenesmus. Give third decimal trituration in two grain doses every two hours.

Sulphur when indicated is a good remedy; there is abdominal plethora, and feeble digestion. The piles are of the blind character; they are not apt to bleed; there is much fulness and burning about the rectum; and they cause a very

uncomfortable sensation, as I know by experience. I cannot from experience advise this remedy in the 30th or 200th attenuations but in doses of several grains, frequently repeated, combined with one grain of Pot. Bitart, I can from experience bear witness to its pain-relieving, pile-curing properties. I would not advise sulphur as a continuous remedy. My experience with it leads me to the conclusion that, when the symptoms have been materially mitigated by several days of sulphur treatment, it should then be changed to spec. nux vom., in quarter-drop doses, to overcome atony of the intestinal tract.

In cases of chronic piles, where there is marked portal obstruction, atony of the whole alimentary tract, and constipation, the stools being dry and light colored, one of the best medicaments we can use is what is known as Scudder's pill, which contains podophyllin one twentieth grain, Phosphate Hydrastin $\frac{1}{4}$ grain in each pill; but instead of giving it in pill form, I would give it in powder well triturated; repeat the dose three times a day, till the bowels begin to move; then less frequently, this with the approved local means will not disappoint. Of the Schussler Tissue remedies I will call attention to but three.

Ferri Phos.—Where the piles are very much inflamed, where there is bleeding and the blood is of a bright red color, in the early stages before induration has occurred, this remedy will do good work.

Calcareo Fluorica—Schussler advises this remedy for relaxed conditions of the elastic fibres, including dilatation of blood-vessels, etc., and from my studies of this drug, I think a list of remedies for this disease would not be complete without it. There is a weakness of the intestinal tube, and an inability through this weakness to expel feces, hence constipation, and frequently determination of blood to the head. Where the patient is scrofulous, very weak and anæmic, alternate with Calcareo Phos. to improve blood making.

I have only time to call attention to a few remedies and so

will close the list, merely observing that I would not think of treating a case of piles in a syphilitic patient without the use of "Aurum Mur.," or "Aurum et Soda."

This short list is put forth not as an experiment, but as one of tried remedies, and if they are used according to the indications given, with the proper local treatment, a well selected dietary, and needed rest, they will not fail to please both physician and patient.

The Physiology of "Similia Similibus." (Thesis.)

By LAURENTIUS CHRISTIAN HJALMAR KYLBERG, Class of '93.

In the closing words of his recent work on physiology, Professor C. Reclam, of Leipzig, calls especial attention to the importance of the following fact: "That in the human body there are many millions of cells, which exist in mutual relationship, and interchanges of activities with the central organs of the nervous system, brain, cord, and ganglia. From the cells the vital forces are imparted to the nervous system; upon their well-being depends the maintainance of the nervous system. But from the superior guidance of this central organ, the cells, in their turn, recieve the pre-requisites for their harmonious existence and free action."

With the above truth in mind, it is possible to reason scientifically on such a deeply interesting subject as the physiological action of drugs; and holding fast to the idea of the mutual dependence upon each other, of the nervous system, vascular system, and cell-structures, we need waste no time on such questions as: "Is the minutely subdivided remedy taken up, and carried to its destination, or field of action, in and along the nerve-sheaths?"—When the activities of life are well understood, I claim that there is no occasion for such speculations.

Since the advent of Homœopathy, many arguments have been booked for and against the "dual action of drugs"—or the facts, which Hahnemann laid down as a foundation for the homœopathic law of "Similia Similibus Curantur"—namely, that a remedy taken into the system, in a minute, (or infinitesimal) dose, will produce a seemingly opposite effect to that produced by a large dose. That this has been tested and found true of many of our most potent drugs, not only by Homœopathists, but also by conservative Allopaths and, indeed, by the leaders of the Eclectic profession, barely needs mentioning. We will take it for granted, that the principle of the so called "dual action of drugs" is understood to be thoroughly synthetic with that of "Similia Similibus."

It may be well to state that the subject of this sketch is an innovation; in as much as I shall endeavor to show the distinct physiological facts upon which depends the seemingly paradoxical, dual action of drugs. Instead of considering "a dual action" as a scientific expression, the following will go toward establishing a *dual appropriation* of drugs, as a more rational and scientific naming of the subject.

How does a "dual appropriation" of a drug on the part of the system take place? That is the question I shall try to answer.

The heart affords one of the most palpable illustrations of drug-action as regards the selective affinity of certain remedies for certain organs, and in this argument, will serve us a good purpose as an example. But before going further, let us consider the physiological importance of a thorough study of the anatomical relations of the various ramifications of the nervous system to this organ; and not only of the heart, but also of every internal organ, or viscus, in the body. For upon a thorough knowledge of the two great divisions of the nervous system, the Cerebro-spinal and the Sympathetic, *depends all* that I shall endeavor to prove in this too brief discourse.

It is well understood by physiologists, that the heart is supplied with two distinctly different kinds of motor nerves; the one set from the Sympathetic System, and the other from the Cerebro-spinal System by the Pneumogastric.

The sympathetic nerve supplies the direct propelling impulse, and the branch from the Pneumogastric, the inhibitory. That these two should be antagonistic, or diametrically opposed to each other, in their several expenditures of force is, although perhaps not universally understood, nevertheless an established fact. This is just as true as, using a homely comparison, that the hair-spring of a watch opposes the action of the motor-power or main-spring.

It is also understood that the *inhibitory* nerve-fibres are the more delicate, sensitive and more easily influenced by medicaments. While on the other hand, the nerve-fibres from the sympathetic are able to resist the influence of drug action, stimulus or depression for a longer time.

Now, if a drug be a depressant in a large dose, I most certainly claim that no minute subdivision, trituration or attenuation will ever change the nature of the chemical composition of the drug; and consequently the *nature* of the drug will remain depressing even in the infinitesimal dose.

How is it then that the small dose of *Veratrum Vir.* acts as a cardiac stimulant and tonic, while the large dose is as certainly a depressant?

Answer—The small dose, like the large one, exerts a depressing influence exactly in proportion to its size, but the minuteness of the dose admits an influence, upon the sensitive cardiac-inhibitory fibres of the pneumogastric *only*. This, by holding the inhibitory nerve in check, allows a greater freedom of action for the unrestrained sympathetic.

And consequently we see that the depressant drug acts *indirectly* as a stimulant and tonic, just as, (returning to the former comparison), the damper, applied to the hair-spring does not *slow* the watch, but increases its speed, on account of the lesser opposing force to the main-spring.

Some of our best authorities claim that the exhilarating effect of alcoholic drink in moderate quantities upon the heart's action, depends entirely upon its narcotizing influence on the cardiac-inhibitory nerve-fibres of the pneumogastric; thus being in fact an indirect stimulant.

If the above be true of the heart, then I claim we have good reason to presume that the same mode of action applies to all other internal organs of the human body, and their various functions. For wherever the non-striated variety of muscular fibre exists, we find a distribution, alike, of nerves emanating from the sympathetic and the cerebro-spinal systems, in the manner already described of the heart.

A few examples from experience will undoubtedly throw some light on the question. Ipecacuanha is a drug that is well known to have a special effect on the functions of the stomach.

It is a well-known fact that the large dose will arouse inverted peristaltic action of that organ, while the minute dose repeated at proper intervals is just the drug that will allay the threatened upward peristalsis, manifested by nausea. Now let us see how it works according to this new theory. In the first place we may consider that inverted peristaltic action of the stomach is one of the most fickle symptoms of a direct, or reflex disturbance, pathological or otherwise. It is truly a phenomenon that will sometimes play "hide and seek" with the shrewdest observer on the lines of physiology and pathology; as, for example, the best authorities will fail to give us the exact causes of the reflex gastric disturbances in early pregnancy. Now then, if the physiological *modus operandi* producing nausea and vomiting, in many cases is subject to speculation, it may be granted, that a certain amount of conjecture regarding the physiological action of remedies that stop nausea and vomiting, is not entirely out of place.

Returning to the anatomical relations of the stomach and

its nerve-supply, we see that like the heart its nerves emanate from two sources, the sympathetic and the pneumogastric.

The gastric branches of the pneumogastric nerve are very extensive, and when we consider that each nerve consists of a collection of different fibres, and that each fibre has its own distinct function, it is only reasonable to presume that some of these fibres from the pneumogastric exert an inhibitory influence upon some of the ramifications of the sympathetic. Accordingly, I am led to believe that the small doses of Ipecacuanha, not large enough to exert an influence on the sympathetic nerve-terminals in the stomach, on the other hand, affords a gentle stimulus to the easily affected branches of the pneumogastric, which, by way of the medulla oblongata, sends back a gentle motor-impulse, that exerts an *inhibitory* action against the agitated branches of the sympathetic; thus maintaining the equilibrium until the remote cause be removed, by kind mother nature, or, as is often the case, the dose simply affords a temporary relief.

Certain drugs have a special affinity for the rectum, as, for example, aloes. How is it now, that, while the crude dose of the drug will produce a grade of inflammation that is everything else but pleasant to the abused member—the rectum; how is it, that the minute dose of the same drug will just quench that same unbearable sensation of heat, which is the manifestation of inflammatory action in that particular place?


The question is easily answered on the same lines as previously indicated. The rectum has its nerve-supply, like other organs, branches from the sympathetic—and some from the cerebro-spinal system. Now, as I have attempted to show, that the nerves emanating from the cerebro-spinal-axis are the most easily influenced, while the sympathetic requires an impulse of far greater momentum, it is only reasonable to infer that the former have an inhibitory influence over the latter, even in this case.

Finally, following these more or less well chosen illustrations, I will generalize the idea in the following way:

Certain remedies have special affinities for special organs and special functions; and we find that almost every internal organ of the human body is supplied, with two, distinctly different sets of nerve-fibres, upon the harmonious action of which, depends the well-being of the part or the function. This harmonious action of the two sets of nerve-fibres we may term equilibrium, or equipoise of the nerve supply of the part. The more powerful in organic life, though comparatively sluggish in answering to a stimulus are the nerves from the sympathetic. The more easily influenced and susceptible to "drug-action" are the nerves from the brain and spinal-cord. And further, we hold that in a great many instances, the latter exert an inhibitory influence over the former.

Therefore, if a drug has an affinity for a certain part or function, the active principle of that drug, when introduced into the system, is taken up by the cells, of the structures affected by the "drug-action," and an impulse is exerted alike, on all the nerve terminals in the proximity. But it all depends on the size of the dose, which set of nerves it be that is capable of taking up the impulse.

And if the cerebro-spinal nerves, in their action, be inhibitory to the sympathetic; and therefore the two sets (in many cases) diametrically opposed to each other, then I claim we have found the real physiological solution of the problem of "*Similia Similibus Curantur*", or the apparent "dual action of drugs," which in the outset of this discourse I termed, "a dual appropriation of drugs."

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Glaucoma.

BY FRANK CORNWALL, M. D., San Francisco.

This affection has been known since antiquity in the inflammatory variety and also in some of its later phases. Its name indicates that this is the case, it referring to the green reflection from the pupil. Mackenzie and some others recognized the tension present in this disease and performed paracentesis, which gave relief, but which was only temporary.

In 1856, Von Graefe employed *iridectomy* which has enjoyed the name of being a permanent cure for glaucoma. Since that time, the precise date of introduction of which I am not aware, sclerotomy was advocated, and to a limited extent employed as a substitute for iridectomy, and in many cases seemed to accomplish the same results. This seemed to upset the theories regarding the "why" iridectomy cured. It was thought by many that the cause of glaucoma was an over secretion of serous fluid by the uveal tract, and the iris furnishing a part of this fluid, it would follow that the abscission of a portion of it would have the desired effect of lessening the fluid contents of the globe.

But recurring again to the time of the discovery of the cure of glaucoma by iridectomy, this procedure has been given such great prominence by leading ophthalmologists since that time until recently as to induce less experienced operators to expect better results than were practicable. It seemed because "Von Graefe said so" that it went forth as an edict from which there could be no repeal. Certainly the salutary effects of the operation, in the light of statistics, have been over estimated. In elucidation of this fact I will quote from a report of 90 cases treated by Dr. Bull of New York in 1889.

"One hundred and fifty four operations were done on one hundred and eighty eyes under consideration. Vision was

temporarily improved by iridectomy in both eyes in two cases, and in one eye in six cases; but in all eight cases, after a few months, a steady loss of vision and narrowing of the field set in, and continuously progressed as long as the patients were under observation."

"Vision remained unchanged neither better nor worse, after the operation for a period of a year or longer, in both eyes in eight cases, and in one eye in twenty cases."

Vision grew slowly and steadily worse after the operation in both eyes in forty cases, and in one eye in twenty-nine cases."

"Vision grew rapidly worse after the operation in both eyes in two cases, and in one eye in eight cases."

Of all these cases only eight were temporarily benefited and not one permanently; not a single cure! If the cases which were made worse by the operation were balanced with the ones which were temporarily benefited, it might be found (the average being taken) that as much harm had been done as good. What encouragement is this to the beginner? Should it not deter the conscientious operator from the use of the knife in glaucoma almost entirely, limiting his operation to acute cases, and those that have age and other conditions to favor results?

Recently there have been some additional observations given the profession on the cause of glaucoma. Dr. S. O. Richey of Washington, D. C., read a paper at the meeting of the American Ophthalmological Society in which he claims it to be constitutional in its origin, and also cites a peculiar similarity of gout and glaucoma as regards conditions in which they occur. He urges the necessity of constitutional treatment and management. This will consist of regulating the food strictly so that no more be taken than can be digested. The urine should be examined, and if an excess of uric acid be present this wrong should be corrected by appropriate treatment. He found galvanism of use.

So it seems after all that has been said and done regarding

the great discovery of Von Graefe of the cure of glaucoma by iridectomy that its use is questionable in almost any case and that we have to search for its relief by other means.

Salicylate of Ammonium in Typhoid Fever.

* BY H. T. WEBSTER, M. D., Oakland, California.

During the sharp but abbreviated epidemic of typhoid fever which visited our city during the past summer, I was enabled to observe the effects of two remedies which I had learned to expect something satisfactory from by reading of the experience of others with them in this disease, and can now confirm the good reports made of them in other quarters. One of these is echinacea, to which I may refer in another article, and the other is salicylate of ammonium.

In the early part of the epidemic, my reliance was chiefly on baptisia and echinacea; but, later on, I was called to take charge of a case which had been in the hands of an allopathic practitioner for three weeks, and which had suffered a relapse shortly before I was called, in which salicylate of ammonium was used as a last resort, with remarkable results. The patient was a young lady of seventeen, rather delicately constituted, and who had become very much prostrated. She was restless, sleepless, troubled with constant nausea, disgust for all kinds of food, and, worse than all, her temperature was 107° F., and had been for two days before I took charge. Large doses of quinine, every four hours (seven grains at a dose), was the treatment she had been having, though a few days before, she had taken five grains of calomel to "act on the liver." The abdominal symptoms had not been severe at any time, and were now almost past. The greatest danger seemed to be from the elevated temperature,

*Read at the Alameda Co. Electic Medical Society, Oct. 24, '93.

as the patient could not sleep nor eat, and was rapidly losing strength. The calomel had acted on the gums and throat and there was considerable local irritation and a teasing accumulation of tenacious mucus in the pharynx, which added to the discomfort and increased the restlessness and irritability.

For two days I tried echinacea and baptisia, in connection with aconite and rhus tox., but little benefit could be observed and, as the parents were in possession of a thermometer and could note the condition of the temperature—which continued at 107° —they were very much alarmed at the state of affairs, worried me, and I decided to swap the vegetable antizymotics for the salicylate of ammonium. This was done on the morning of the third day, and within the next twenty-four hours I had the satisfaction of knowing that the temperature had been down to 104° . The following morning it dropped to 103° , and the patient had rested well a large portion of the night; and there was steady and rapid improvement after this, appetite returning, and convalescence being established within two weeks after my first visit. In less than three weeks after I began to treat the case the patient walked five blocks, and surprised me by making a call at my office, "just to let me see how well she was getting along."

For so unpromising a case, and one which had been subjected to a relapse, this was certainly a good showing for salicylate of ammonium, and I gave it further trial in several cases. I found it a good prophylactic for those who were nursing others afflicted and who had been exposed to the same cause of contamination—the use of infected milk—as well as to severe cases marked by high and unremitting temperature. The worst feature connected with the drug is its unpleasant taste, which is so objectionable as to totally unfit it for a remedy with many who have been accustomed to more pleasant medication and who are not unconscious or delirious. If some method could be suggested by which the ex-

cellent effects of the drug could be obtained and the unpleasant taste avoided, it would be an important gain.

This little experience confirms, in my own mind, the good opinion I had previously formed of this remedy, and I shall certainly resort to it again, should I ever need a reliable and satisfactory remedy for the treatment of typhoid fever with dangerously and persistently high temperature. In scarlatina anginosa, and other conditions attended with high grade of fever and considerable blood depravation, it ought to afford satisfaction. It will hardly be needed, however, in the form of "scarlatina" (rubella) that commonly occurs on this coast.

The more I use the sedatives in typhoid fever—the "special sedatives" of Scudder—the less I am impressed with their value in this affection. They may lower the grade of febrile action, and thus favor a better and more speedy convalescence—less burning up of tissue—and may be commended where better means are not to be had; but where there is so grave a condition of blood poisoning as there is in typhoid fever, the pronounced effects which we may observe from them in febrile states marked by a less depraved condition of the fluids cannot be derived in this disease.

Here the antiseptics become the true sedatives; not, perhaps, by relieving excitement in the vasomotor centers primarily, so much as by correcting the "ptomaine"—neutralizing the poison upon which the irritation depends.

However, I am convinced that all epidemics of typhoid fever are not alike. I am a believer in the doctrine of epidemic influences and epidemic remedies, in a moderate degree. The idea may be carried too far, probably is, in some cases, but it is nevertheless a factor not to be ignored. In the epidemic to which I have referred in this article several of the peculiarities of old-fashioned typhoid fever were not well marked. There were not the tongue indications usually seen, the tongue preserving almost a normal appearance



throughout, in many cases, though occasionally there was an exception. The temperature took the accustomed gradual rise, but the morning remission was not well marked until very close on the time of convalescence, and the period of continuous fever was stubbornly protracted, some cases continuing six weeks without marked change in the appearance of the tongue or the marked prostration that would ordinarily be expected. There was little of the old-fashioned tympanites, though intestinal irritation, with pain and diarrhoea, was a common symptom. In some cases the petechiæ were well definable, and the etiology pointed unmistakably to infected milk from a single dairy, where the proprietor had been through a course of the disease, and where the sanitary officers saw abundant evidence to convince them that the water with which the cans were washed and with which the milk was probably adulterated, had been contaminated.

There were such marked cerebral symptoms in some cases as to arouse the suspicion that there was an element of meningitis present. In fact, during the epidemic, several deaths from cerebro-spinal meningitis were reported. In such cases echinacea would certainly be the leading remedy.

In preparing the salicylate of ammonium the salicylic acid from wintergreen (notably Lloyd's,) should receive preference over the common stuff, usually prepared from crude carbolic acid. The formula for this preparation can be found on page 53, Part II, Dynamical Therapeutics.

Titles for Journal Articles.

BY WM. SUTTON, M. D., Marvinville, Arkansas.

Ever since my initiation into the medical profession, the inappropriateness of a large number of titles in our medical journals has been a thorn in the flesh. For instance, "A Case in Practice," is often flaunted as a headline; while this may

catch the eye at the time it is a sure passport to oblivion in the future. Take any ten journals and if you don't find at least one article in every nine so headed you have been more fortunate than I have.

Now that title means nothing, although it may cover up an excellent article on Conjunctive Fever, Meningitis, Splenitis, Osteitis, Catarrh, Croup, or any one of the thousand and one ills that afflict patients and worry doctors, or it may give something new in therapeutics that a busy doctor may want to refer to.

Is it not just as easy to say "Iodoform and Bismuth in Ob-
stinate Fistula"? Or, it might be put, "Ear Practice", "Ob-
stetrical Cases", "Pneumonia", "Angina Pectoris" and "The
Use of Viratrum and Jaboranda", "Santonine in Urethral
Irritation", "Lobelia in Rigid Os", "Ammonia Bromide in
Convulsions", etc..

A short time ago I had cause to refer to an article of con-
siderable worth; not recollecting the heading, but knowing
the article was on ear practice, I ran through the index on
the 'Ear', of the 'Aural affections', then of the leading remedy,
even turning to several articles that might be what was want-
ed, after an hour's search in running down the index to find
some probable clue the "Cases in Practice," came under my
finger and after investigating several, the right one was at
last found. But I thought like the Dutchman that got blow-
ed out of a well. A friend ran up and asked, "Are you hurt,
what do you think?" He replied, "No, I ain't hurt, but I
tinks tam."

I notice many good writers usually begin the heading with
the name of the leading remedy, followed by the part or func-
tion to be influenced; this is a good plan but is not always
practicable. Now the thinking practitioner not only takes a
journal for present information, but he finds it both pleasant
and profitable to refer to those of last year, or the year before
or any other year, and if he be busy, he doesn't want to paw

over a bushel of index to get a pint of information. Also remember the editor seldom has time to select you a title. It may take you five or ten minutes to select a suggestive title that points at once to the leading feature of your article, but you will keep many a busy M. D. from breaking a certain commandment, and if you be a Christian, this is sufficient inducement to be accurate. If you write anything good that helps in a pinch, it is surely worth a name; if it isn't good, let it be nameless or call it a waif. Eclectics like to have everything clean and with the least possible amount of uncertainty or obscurity about it.

Titles that *mean* something make a handy index and a clean and useful journal. If you want your article read a year from date, give it a name that people will know it by, not only now, but in the future; if you don't do this, it will die "a-bornin", and it deserves to.

Danger Signal.

BY CARL MURRAY, M. D., Chico, California.

Editor of the Journal:

I wish to call the attention of your readers to the following prescription, taken from the "Medical Age."

R	"Hydrochlorate of Cocaine,	-	grs. xvj
	Sulphate of Morphine,	- -	grs. v
	" " Atropine,	- -	grs. iv
	Pd. tannin,	- - -	grs. xvj
	Vaseline,	- - -	3 j
	Essence of Rose,	- - -	qs.

"Make an ointment and apply to affected parts after each movement of the bowels."

This is recommended as a good treatment for Hæmorrhoids. There are some modifications of the above prescription going the rounds of the Medical Journals, but all of them a-

bound in cocaine and atropine in nearly the same proportion.

Of course any one can see that this is Allopathic treatment. It is the combination of cocaine and atropine that makes this dangerous.

Whoever originated it certainly used it but very little on Hæmorrhoids. It cannot be used in the minutest qualities on patients of fine, nervous, and susceptible systems without producing toxic, and in some cases alarming symptoms. The dark, swarthy skined, dark eyed, and black, coarse haired, races may stand "smearing" of their rectal parts with it, but the blonde, blue-eyed, clear skinned, fine haired, must give it a wide berth.

What is the best treatment for strychnia poisoning?—Chloroform inhalation to control clonic spasm, supplemented by Hydrate of Chloral and Specific Gelseminum hypodermically in alternation, beginning at the base of the skull, and proceeding down the spinal column till you have injected 160 grs. of the first, and three drams of the second, if needed. This will do the business if anything will.

There is Always Room at the Top.

BY DR. J. BALL, San Francisco.

The medical profession, or a great part of them, seem to be fearful of a plague of doctors. But the population of the country is increasing, and, it is to be presumed, that an increased number of doctors will be needed to sign death certificates.

This fear of overcrowding can only come from mercenary motives, for no intelligent man or woman can believe that the diffusion of medical knowledge can be of any less advantage to the public at large than the diffusion of any other

knowledge. If those who are afraid of being crowded out will only strive to reach the top of their profession, they will find plenty of room, for it is only the lower stratum of any trade or profession that is overcrowded and underpaid.

At any rate, it will not do to make the profession of medicine inaccessible to those who desire to enter it, either by legislation or any other means; for the history of the human race demonstrates to a certainty, that whenever any sect, class or profession have been given, or have acquired, any great privilege or power over the majority of their fellow men, such privilege or power, has sooner or later, invariably been abused.

If ever the profession becomes so hedged in by legislative and collegiate restrictions, as to prevent any but the favored few from entering its ranks, it will soon become overbearing in its attitude and extortionate in its demands, and thus work its own ruin.

But although there is no good purpose to be served by placing obstacles in the way of those who desire to become medical practitioners—when these obstacles are only intended to prevent overcrowding—there is a very laudable purpose to be served by making the preparatory studies so practical and complete as to fully qualify the graduate to enter at once with confidence into the responsible position of family physician. The only question is, as to the best methods of attaining this object.

Lawson Tait recently spoke in favor of the apprenticeship system for the study of surgery. He thinks that hospital practice cannot take the place of study of the management of patients in their own homes. Now, while the apprenticeship system would not work in the United States, we have something in the personal interest of our professors, which is perhaps better. Anyhow, hospital practice that a student could get in this city would be liable to do him more harm than good, in fostering careless, if not worse habits of treatment.

In any method of medical education the principle part of the work must be done within the college halls—the actual experience coming later. What, then, are best means of preparing the student for the actual work of the physician? A thorough knowledge of anatomy is certainly necessary. Physiology is not less necessary; for, as our knowledge of this science increases we become the more impressed with its almost infinite possibilities. If cell-life be the physical basis of all life, and differentiation the only difference between the simple and more complex forms of life, it is clearly of the utmost importance to understand cell nature, the means by which cells develop, and their methods of propagation. Chemistry is another science which is of paramount importance to the physician. What physiology is to protoplasm, or to living matter, chemistry is to matter in its unorganized, or non-living state.

A thorough knowledge of these subjects would prepare the student for the study of the other subjects which are treated of by the professors in a medical college, and which of course, are the real objects of a medical training, as they treat of the various manifestations of diseases, and the best means of curing, or at least, of ameliorating them.

The physician should have a good general education, and while there is no danger of his being over-educated there is danger, for the average man at least, in trying to cover too much ground—having too many irons in the fire, so to speak. The ordinary man must concentrate his efforts on some special object if he is to accomplish anything noteworthy.

Only those subjects, sciences, or branches of science which will enable the student to obtain an accurate knowledge of the human body and its diseases, the best methods of maintaining it in health or of restoring it to a state of health when diseased, and the best medical or surgical means by which these objects can be attained, should constitute a medical collegiate course.

MISCELLANEOUS.

State Meeting.

The Twentieth Annual Meeting of the Eclectic Medical Society of the State of California was held in the Medical College Hall on Wednesday and Thursday, Nov. 22nd and 23rd. The attendance was the largest in the history of the Society.

Owing to the efficiency of President H. B. Mehrmann not a moment of the various sessions dragged, but on the contrary hardly time sufficed to transact all the business and finish the elaborate programme.

The following twenty-four papers were presented to the Society. All were carefully prepared and were listened to with attention. They were as follows:

Stenosis as a Cause of Sterility	}	-	D. MACLEAN, M. D.
Post Partum Hemorrhage			
Medical Legislation, State and National	-		J. FEARN, M. D.
Alimentation in the Treatment of Diseases	-		J. C. FARMER, M. D.
Malarial Fever and Its Treatment	-		M. V. YANCY, M. D.
The Resemblance of Human Life to Plant Life	-		H. T. Webster, M. D.
Water and Some of Its Uses	-		J. STARK, M. D.
Some Therapeutic Hints by the Wayside	-		H. VANDRE, M. D.
Oligarchy of Medical Fossils	}		M. B. MALLORY, M. D.
Malaria and Its Multiple Phases			
Faradism in Disease	-		T. CAMPBELL, M. D.
Kaki and the Diseases Requiring Its Use	-		J. W. HUCKINS, M. D.
Burns and Scalds	-		M. PERRY, M. D.

Improper and Proper Protection of the Skin	- -	H. L. DEIMEL, M. D.
Dystocia	- - - - -	F. V. WALL, M. D.
Endometritis	- - - - -	B. STETSON, M. D.
Inflammations of the Knee Joint	-	W. B. CHURCH, M. D.
Alstonia Constricta in Typhoid Fever	-	C. J. SHARP, M. D.
Spinal Concussion	- - - - -	M. H. LOGAN, M. D.
Chronic Catarrh of the Middle Ear	-	H. W. HUNSAKER, M. D.
Lupus	- - - - -	G. G. GERE, M. D.
Ocular Therapeutics	- - - - -	F. CORNWALL, M. D.
Asphyxiation with Illuminating Gas—Its		
Pathology and Treatment	-	M. E. VAN METER, M. D.
Typhoid Fever	- - - - -	J. G. THOMPSON, M. D.

The election of officers resulted as follows: President, H. B. Mehrmann, M. D., re-elected; 1st Vice-President, C. E. Hailstone, M. D.; 2nd Vice-President, C. N. Miller, M. D.; Recording Secretary, J. C. Farmer, M. D.; Corresponding Secretary, A. E. Scott, M. D.; Treasurer, H. W. Hunsaker, M. D..

Board of Censors: J. G. Tomkins, M. D.; E. J. Tucker, M. D.; B. Stetson, M. D.

Board of Examiners: President, D. Maclean, M. D.; Secretary, G. G. Gere, M. D.; F. Cornwall, M. D., M. H. Logan, M. D., C. N. Miller, M. D., N. B. Church, M. D., A. E. Scott, M. D. Alternates: W. O. Wilcox, M. D., W. Tanner, M. D., H. Vandred, M. D.

The San Francisco City and County Society of Physicians and Surgeons.

This Society was called to order by President C. N. Miller at 8.30 P. M., Nov. 6th, 1893.

The election of officers was in order: Dr. Hunsaker was elected president; Dr. Tanner, vice-president; and J. C. Farmer, secretary and treasurer.

At Dr. Miller's suggestion, the secretary was instructed to prepare the minutes of each meeting for publication in the JOURNAL.

The following resolution was adopted by the Society:

Whereas: The crime of abortion is alarmingly prevalent in this city, and

Whereas: The public prints contain advertisements boldly soliciting patronage for this class of business, therefore be it

Resolved: That the San Francisco City and County Society of Physicians and Surgeons deprecates and condemns such inhuman and criminal practice, and will render every assistance possible to the authorities in their efforts to bring such offenders to justice.

Dr. Gere related a case of persistent pain and soreness of the fingers and forearm which had been diagnosed as writers' cramp but which the doctor thought was due to neurasthenia the patient being in a low state of general health. All ordinary remedies known to the profession had been used. Dr. Miller suggested inquiring if the patient wore flannel next to her skin.

Dr. Logan, recently returned from Chicago, made a few remarks concerning the Eclectic display at the World's Fair.

Dr. Yetter detailed an interesting case of congenital malformation of the knee-joint which in the course of some months was corrected by time alone. The case was one of transposition of the patella whereby the leg was freely flexed upon the anterior aspect of the thigh.

The matter of a display of Eclectic literature, medicine, and surgery at the Mid-Winter Fair was discussed. Also the advisability of accepting the invitation extended by the

committee of entertainment, of occupying one of the 181 evenings of entertainment in the hall on the Fair grounds.

* * * * *

Nov. 20-93.

President Hunsaker occupied the chair.

Dr. J. C. Schlarbaum's resignation was read and accepted.

Dr. Van Meter related a case of olfactory hallucination, the smell of wood-smoke being at times acutely distinct. Dr. Cornwall thought it was due to post-nasal inflammation and disturbances of the terminal nerves. Some cases of chloroform-scented breath, especially noticed during the recent grippe epidemic, were related but no known cause ascribed for the phenomenon.

Dr. E. H. Mattner read an interesting paper on "Acute Bronchitis in Children." Referring to the external applications the doctor suggested, Dr. Cornwall strongly advised the use of cold water packs over the chest instead of poultices or liniments. Dr. Van Meter raised the question that cold applications might cause a congestion of the tubes and do more harm than good. Dr. Maclean said it depended upon the stage and character of the affection as to the kind of an application to make to the chest.

Dr. Van Meter told of a case that he had under charge of violent and persistent hysteria that yielded but slightly to anti-hysterical remedies or narcotics. It was suggested to try hypnotic influences intelligently administered.

JESSIE C. FARMER, M. D., Sec'y.

Alameda Society.

The Alameda County Eclectic Medical Association met in the rooms of the Society, 1062 Washington St., at 8 o'clock P. M., October 24th, with the President, Dr. Webster, in the chair. The Secretary, having been called from the city, had

placed the minutes of the previous meeting in the care of Dr. Stetson, who was appointed Secretary Pro Tem..

Dr. Webster presented an interesting paper upon Salicylate of Ammonium in typhoid fever.

As a sedative in typhoid fever, the doctor spoke very highly of this remedy, with which he has had considerable experience. He accounted for its action by its over-coming septic conditions and allaying nerve excitement, far excelling in this particular, ordinary remedies. The formula for this preparation is to be found in the doctor's new work entitled Dynamical Therapeutics.

Dr. Fearn believes that its action is due to the salicylic acid it contains, the ammonium being a stimulant, over-coming its depressing effects.

After other interesting remarks, the meeting was adjourned to meet November 14th at the same time and place.

* * * * *

Nov. 14-93.

The Alameda County Eclectic Medical Association met in the rooms of the society, 1065 Washington Street, at 8 o'clock P. M., with vice-president Dr. Church, presiding.

The sec'y being absent, Dr. Stetson was appointed secretary pro tem..

Dr. Fearn presented a most interesting and instructive paper, subject: The Medical Treatment of Piles, upon which the presiding officer commended him highly for the extreme pains taken in preparing the paper.

Dr. Fearn had used Ichthyol with much advantage in cases of piles where there were burning and itching.

It was suggested by the chairman and approved by the Society, that any member failing to prepare a paper when assigned him should be fined, unless a satisfactory excuse be given.

On motion, the Society was adjourned.

B. STETSON, M. D., Sec'y pro tem.

College Notes.

The month of November has been one of the most interesting of the session of 1893, especially to some fourteen students, who, by the way, are students no longer. For the two weeks ending November 16th, they passed through all the torments of a fire which was to try every man's work; but they had built on a strong foundation and were equal to the test. Friday morning, November 17th, found them gathered at the College Hall for the last time as a class, with anxious faces awaiting the coming of the Dean. The little message which he brought to each was short but *very* sweet, and a happier group than they would have been hard to find.

The graduating exercises were held on the evening of November 22nd, at Metropolitan Temple. The hall was crowded with an attentive and appreciative audience; the programme was highly entertaining, and altogether it was spoken of by all as being a most brilliant success, of which our College may justly be proud. The motto, "Ut prosimus, '93," was neatly arranged in a floral design at the back of the stage. Translated, it reads, "That we may do good." May the class prove true to the motto they have chosen.

As the exercises closed, the friends of the class crowded arounded to offer congratulations to the young doctors, but the ones most appreciated were those from the professors. In the three years they have been associated together as teacher and student, they have hardly realized how strong was the tie which has bound them together.

The society of the Faculty they have enjoyed, their enthusiasm and zeal have been admired, and their skill they have desired to imitate, and these relations could not be ended without feelings of regret. But we are sure that wherever the class of '93 may be scattered, the Faculty of their Alma Mater will adorn one of the brightest places on Memory's walls.

The Juniors and Freshmen are pleased at the prospect of

a rest, and that when school begins in the Spring, they will fill the coveted seats at the left.

Some of the graduates have not decided as to their location but there is always room for the thorough, enterprising, Eclectic physician, and we are sure that they will succeed if they practice the good instruction which they have received.

Dr. Kylberg and Dr. Derrick will locate in Oakland.

Dr. Goyer has gone to Nevada County.

Dr. Bond has found the city so attractive that he expects to remain in San Francisco.

Dr. Remarque will spend some time visiting and recuperating before beginning practice.

Some are planning to take post-graduate courses to fit them for specialties, and all will soon be hard at work laying the foundation for a career. We hope all will prosper, and that we shall meet again, year by year, at our annual alumni festival board.

LA FEMME.

Truthful James on California Locations For Eclectics.

BY H. T. WEBSTER, M. D., Oakland, California.

I have noticed, at divers times, a disposition on the part of California writers to magnify the attractions of this State for eastern Eclectics—as though there were a demand for more Eclectic physicians here than we could supply; as though there were a crying necessity for more of our kind to come in and occupy the land.

Now I believe there is a great deal of fol-de-rol about this, and that such writers are making a mistake—not as they are concerned themselves, but those who may be deluded into coming here on false hopes.

Our Bureau of Information on Locations contains some al-

luring announcements of suffering villages which are pining for Eclectic physicians, and probably some of these are really tempting offers, but in more than one of them some sly individual has a private axe to grind, in bringing the notice before the public. Some county-seat physician wants an Eclectic at a convenient outpost so that he may get a consultation call occasionally, no matter whether the poor devil who occupies the land for his convenience more than barely exists or not. Or, perhaps some one wants to punish an allopathic competitor by sending an Eclectic into his territory to harass him. Little thought is taken of the fact that the Eclectic who goes in may be the worst sufferer before he gets enough out of the business to save him from starvation. There are many ways that are dark in the location business, and woe to him who trusts too much to advisers when seeking a place to begin practice.

I do not think that those chiefly instrumental in perpetuating the delusion that California is a paradise for doctors, and especially Eclectic doctors, intend any harm to the profession; they are simply deluded themselves, and they delight in extolling our "glorious climate." I do not wonder that some people delight to live in California; I can appreciate their enthusiasm, but all this does not constitute the whole State a paradise and soft snap for Eclectic doctors. Those perpetuating the delusion are understood to be the hyper-enthusiastic journalists who spread the news abroad. I do not ascribe selfish motives to them; they are simply—unwittingly—dealing in a lot of buncome.

In the capacity of editor, and correspondent with physicians from all parts of the Union,—and with disappointed Eclectics who have emigrated to California in the past—I revolt against the promulgation of any such flowery buncome, as that there is a great field for our school in this State at present. It is easy to delude an eastern man into believing that gold is to be picked up in California almost

anywhere. He is not accustomed to the windy, bombastic methods of the wild, wooly west, nor will he be until he has ceased to be a tender-foot. And this only comes, in some cases, after much tribulation.

The facts are, that all places¹ worth anything as locations—as desirable places to live in and do business in—are pretty well supplied with medical men, such as they are. The allopaths have invaded every part of the State worth living in, and if Eclectics are to succeed they must go in and get a share of the business by proving themselves worthy—and this sometimes requires years of time and labor. I do not make these assertions to discourage our students, for there is room for them if they are willing to begin at the bottom of the ladder and work themselves up, but if they expect to succeed famously the first year they are liable to be disappointed.

Old Californians are suspicious of eastern people. It therefore takes time to break through a certain kind of reserve engendered by this sentiment, unless the newcomer locates in a colony of eastern people, and these colonies usually bring a physician with them. Therefore the eastern Eclectic labors at a disadvantage, or is liable to, on first coming here. It takes him a year or two to get wonted. He may succeed finally, out of sheer stubbornness—perverse-ness, perseverance, pluck, call it what you will—ten to one he will reproach the day he crossed the plains, many a time, before he has become as snugly fixed as he was in his old eastern location.

The California Medical College numbered about 70 students in its last class. From present appearances we will be able to more than supply the demand of our State for our class of physicians. Indeed, they spread all along the Coast. They are practicing in all of the Pacific States. I shall not be surprised if our students are emigrating eastward—beyond the Rockies—within a short time. Under

such circumstances why do we need an influx of foreign Eclectics, and can we honestly advise them to come here?

I write this that the subject may be seen on both sides. If I have painted the picture in too sombre coloring, I will leave it to the rank and file to say how far I have departed from the facts.

Professor Webster's Therapeutics.

BY F. CORNWALL, M. D., San Francisco.

As is known by many, Professor Webster and myself have been known to each other for many years. We were college mates and room mates. We knew each other almost as well as brothers. We belonged to the same quiz class and sat near each other in school. His intellectual capabilities and attainments I know as much of (perhaps more) than does any other. Is it not natural now that I should have a deep interest in the product of his intelligence?

Our late lamented Prof. Howe said to me eleven years ago when here that he recognized Dr. Webster as one on whom the future responsibility of the fortunes of eclectic medicine would rest. He remembered him in his college quizzes and later as a writer.

In the midst of the turmoil of a busy life, without the employment of great help or other means, he has produced a book of which I am proud, and I deem it one of the very best of the kind in America. I am not now referring to the printing or the binding but to the useful matter it contains.

There are so many books published now, and so few of them contain anything new, or are written in a way to show that the author had a comprehension of his own that it is to me refreshing to read so much that indicates original investigation as is in Prof. Webster's book. This book comes to us just in time when our older authors' works are

getting out of date in many things. How true the prophecy of Prof. Howe! I refer to this book now more frequently than all others in prescribing for my patients. I bought one copy and thought it so creditable that I presented it to an allopathic friend and now have ordered another. If every Eclectic would subscribe for this book, he would be doing himself more good, so far as a medical library is concerned, than by any other investment.

Remedy for Corns and Bunions.

Those of our readers who know from personal experience that "Great aches from small toe-corns grow," will be interested in the following prescription kindly furnished by Dr. Flora W. Smith of Yreka, California.

℞ Cannabis Ind.,	"	"	"	gtts. v
Asepsin, (Lloyd),	"	"	"	gr. I
Acidi Salicyl,	"	"	"	gr. xxx
Collodium,	"	"	"	3 ss.

M.

Sig. Apply night and morning for four days, after which soak in hot water, and the corn can be readily removed.


Trional as a Hypnotic.


At the State Meeting (May 5th, 1893) of the Practitioners Society of New York, Dr. Kinnicutt remarked that as a hypnotic, trional "is efficient in gramme doses and is quite unobjectional." Dr. Thompson said that trional had been used in twenty or thirty cases at the Presbyterian Hospital and the impression he had obtained of its usefulness was like Dr. Kinnicutt's. It had acted very promptly in most cases, certainly within half an hour, often within fifteen minutes. It could be taken easily, dry on the tongue. He had never observed that vertigo or depression followed its use.

Euophen in Special Lesions.

The value of cresoliodide or Euophen in all cases amenable to the usual Iodoform treatment is now well-known to most surgeons. But the superiority of Euophen in the treatment of venereal ulcers has not received due attention from any but syphilographers, except in isolated groups of cases. In a large number of reported cases of chancroid, healing took place in every instance between four and sixteen days. An eligible mixture for these sores is Euophen and Boric Acid in equal parts (or stronger if required) applied as a powder and covered with sublimate gauze. Crusts should be removed and the surfaces washed with sublimate solution, before each application. In chancroidal bubo the cavities are packed with tampons dipped in the Euophen—boric mixture. No irritation is caused even when considerable quantities are employed. For moist papules, cicatrization was induced in from three to ten days by dusting 1 to 5 Euophen-Boric powder over the lesions. To insure efficacy, the powder must be brought in direct contact with moist, secreting surfaces.

Dr. W. A. JONES, of Malvern, Ark., under date of Oct. 3, 1893, writes: I have given PAPINE a thorough test and like it better than any other preparation that I have ever used of all the opiates. It never nauseates, either primarily or secondarily, and has given relief where all other preparations of Opium have failed. It acts well as a febrifuge.

 The job printing department of the JOURNAL is prepared to turn out books, pamphlets, office stationery, etc. in good shape, quick time, and at fair prices. Try us.

 Please mention this JOURNAL when writing to our Advertisers.

Pelvic Cellulitis.

The diagnosis of this disease is not always easy, but when we meet a case of this kind before pus has formed, much benefit is derived from prescribing the Elixir Six Iodides, but when pus exists, it is good surgery to give it exit, never losing sight of the most rigid antiseptic measures if the knife be used.

BROMIDIA (Battle & Co.) is a well-known preparation of standard hypnotics so combined as to produce the most beneficial effects with a minimum of unpleasantness. We are glad to see the following endorsement from so high an authority: "The results obtained from Bromidia have been excellent. It combines all advantages of other hypnotic preparations without their disadvantages. The fact that it produces no unpleasant sensation on awaking renders it specially valuable."—[*Chicago Medical Standard*, November, 1893.]

Bureau of Information.

The State Medical Society has opened a "Bureau of Information" regarding locations desirable for physicians and surgeons. Any one knowing of good locations, or desiring to sell locations, or wishing competent assistants, should communicate with the secretary.

Any advertised location in this JOURNAL that has been filled, please notify the secretary, that its publication may be withdrawn.

The following locations have been sent in for publication:

WALNUT CREEK—No Eclectic in the place. Population of town 400. Large surrounding country. One physician in the place; intemperate. Dr. J. W. Huckins of Danville, will do all he can too assist the new-comer.

COTTONWOOD, SHASTA CO.—It has been reported to this "Bureau" that there is an excellent opening for an Eclectic at the above town.

OAKDALE—Dr. L. Lee wishes a partner. He has been in place sixteen months. First twelve months made over \$3,000. For particulars apply to secretary.

KNIGHTS FERRY—Twelve miles from Oakdale. No Eclectic in place. Good opening.

SAN FRANCISCO—Two thousand dollars will buy books and instruments worth \$1,000, furniture worth \$1,500, and the good-will of a good paying practice in the city of San Francisco. Office rent free. Reason for selling, ill health. Address, "DOCTOR," California Journal Co., 1420 Folsom st., San Francisco.

WANTED—By a middle aged, married Physician and Surgeon a partnership in a well established practice, or would buy the whole. Must bear investigation. Address, with full particulars and lowest terms, "SURGEON," care of California Medical Journal Office, San Francisco.

Also two good locations in the country for active workers.

All letters addressed to the secretary of the "Bureau of Information of Locations" will be answered promptly.

J. C. FARMER, M. D., Sec'y.
921 Larkin St.
San Francisco.

FOR SALE.

One R. & J. Beck binocular Microscope with numerous accessories; complete working outfit, cost \$1,600; will sell for \$800. Practically good as new. Full particulars by addressing Pacific Loan Co., 114 S. Spring St. Los Angeles, Cal.

EDITORIAL.

Our Journal.

It is hardly necessary to inform our readers that the present issue of the JOURNAL is the largest and probably the best number we have ever published.

The article by Doctor Boericke is a remarkably clear statement of a subject not generally well understood. It will be appreciated by Eclectics, and we hope the Doctor, who is widely known as a representative Homoeopathist, will find time to favor us often.

The thesis by Doctor Kylberg has all the fresh positiveness of the new graduate, and although we may give his conclusions the Scotch verdict, "Not proven," still his theme is well presented and worthy of thought.

Other contributors, with whom our readers are better acquainted, have all done their best to prepare us a Christmas treat.

We are in daily receipt of letters stating that our JOURNAL is growing in favor. Doctors in whom we have confidence, write that they are well pleased with it even now, and expect soon to see it leading Eastern journals in the race.

That's the talk we like to hear. Let us quit taking dust! We must not be so lazy; but must study more, think more and write more. Boys and girls, go to work. Don't hang up the shovel and the hoe, and waste precious time singing about our "glorious cause." Do something. Fish or cut bait. Make our cause glorious, and it will sing its own praises.

Take your hands out of your pockets. Write for '94. Pay up for '94. Have confidence in our efforts for '94, and let us all do so well, that we may say of each issue of '94, "It is thus far the best number published."

M.

Commencement Exercises.

The Commencement Exercises of the California Medical College, were held in Metropolitan Temple, Wednesday Evening, Nov. 22nd. The audience was the largest that has ever attended our Exercises; the house being packed, galleries and all, and the following programme, which was well rendered, was received with warm applause. This large attendance, and great interest manifested by the public, was encouraging, indeed; but it was only a fore-shadow of greater and better things that are in store for Eclecticism, in general, and our College, in particular, in the future.

ORDER OF EXERCISES.

1. SELECTION, "NORMA," *Bellini*
ORCHESTKA.
2. INVOCATION,
REV. LESLIE SPRAGUE, D. D.
3. CORNET SOLO, "MAGNOLIA SERENADE," *Catlin*
I. G. COGGIN.
4. INTRODUCTORY REMARKS,
PROF. H. T. WEBSTER, M. D.
5. PIANO DUO, "MARCH TRIOMPHALE," Op. 91
MISS EMMA M. GAMER,
MISS LEOTTA M. FOREMAN.
6. CONFERRING OF DEGREES, BY THE PRESIDENT
PROF. D. MACLEAN, M. D.
7. VOCAL POLKA, "THE DAISY," *Arditi*
SENIORITA ANDREA MOJICA
Accompanied by MME. ELLEN COURSEN-ROECKEL.
8. ADDRESS, "DISEASE AS A CAUSE OF POVERTY"
A. G. WARNER, PH. D.
Professor of Social Science, Stanford University.
9. SELECTION, "HONOR TO THE LADIES," *Fährbach*
ORCHESTRA.
10. MALE QUARTETTE, "SPRING'S RETURN"
W. G. WOOD, First Tenor
W. W. DAVIS, Second Tenor
J. M. ROBINSON, First Bass
WM. NEILSON, Second Bass
11. BENEDICTION,
REV. LESLIE SPRAGUE, D. D.
12. GOOD NIGHT,
ORCHESTRA,

The Graduating Class was one of the very best, in attainments, that ever left our College. They are graduates

of whom we may well feel proud; and we doubt if there was ever a class left any school, who were better prepared to enter into the practice of their profession, than were those who composed our graduating class, this year.

The class was not large, but made up in quality what it lacked in numbers. There were two ladies and twelve gentlemen whose names are appended below.

The Commencement coming, as it did, at the time the State Society was in session, we had many of our friends from the country and neighboring towns, with us; and all went away feeling that there is a great future for the California Medical College.

Already, inquiries are being made in regard to entering the classes next year and we expect a veritable boom at our coming session. Let every one work to make it the Banner year in the history of our school. No one need have a hesitancy about advising their friends to cast their lots with us, for we will not disappoint them.

LIST OF GRADUATES.

JAMES M. BOND.....	LEMOORE, CAL.
J. MONROE CAIN.....	MONROE, OR.
VICTORY A. DERRICK.....	OAKLAND, CAL.
J. RADFORD FEARN.....	OAKLAND, CAL.
WILLIAM C. FIELD.....	LA GRANGE, CAL.
B. HUGH FOREMAN.....	STOCKTON, CAL.
EDWARD H. GOYER.....	DAYTON, WASH.
GEORGE GUNN	SAN JOSE, CAL.
FRANK HUCKINS... ..	NAPA, CAL.
I. C. HJALMAR KYLBERG.....	GOTHENBURG, SWEDEN.
JUDSON LIFTCHILD.....	OAKLAND, CAL.
BERNHARDT MEYERS.....	SEATTLE, WASH.
JOHN CALDWELL PICKERING.....	SAN JOSE, CAL.
CHRISTINE E. REMARQUE.....	ROCHESTER, N. Y.

The State Society.

The meeting of the State Society has come and gone. It was fairly well attended, but not so well as it should have been. The country delegates were not numerous. Outside

of the professors and graduates of the California Medical College, but few presented an appearance. The College family however, are getting numerous, and can make a creditable showing themselves.

In the past fifteen years we have been urging a closer unions with us of the members of our school, who have come from the Eastern side of the Rocky Mountains, and located in our State. We tardily begin to realize that it has been work in vain. They may glibly talk of their Electicism, but are inert matter when it comes to action. These people are the Chinese of the Eclectic School. They take all the advantages they can get, and shirk all the responsibilities and burdens that it is possible to avoid. In this matter we do not wish to be misunderstood, we refer to those who do not affiliate with the State Society and contribute to its life and prosperity. We sometimes think that a boycott would not be out of place.

Too much credit cannot be given President Mehrmann for his earnest and faithful efforts in the interests of the Society. He secured the best attendance, the best medical and surgical papers, and altogether the most successful meeting in the history of the Society. He well earned his re-election, and we may cheerfully look forward to still greater success at the next annual session.

Dr. Mehrmann is the first graduate of the California Medical College who has held the office of President, and that alone suffices to account for his earnestness and energy. The Society however, was captured by the Alumni; President, first and second Vice-President, Recording and Corresponding Secretary and Treasurer, with a few others that we do not now remember, are all alumni.

Feeling that the Society is now in good hands, the old guard can work as silent partners.

MAC,

Our Alumni Banquet.

The Alumni, of the California Medical College, met in one of the lecture rooms at the College, on Thursday evening, Nov. 23. The meeting was well attended, and after the election of officers, and the usual routine of business, adjourned, and repaired to the large College Hall to meet the Faculty, members of the State Society and other invited guests at the annual Alumni banquet. The hall was tastefully decorated and the tables extended around three sides of the room. A band was in attendance and discoursed sweet music while the Alumni and invited guests disposed of the many good things before them.

After an hour had been spent in enjoyable conversation and in satisfying the inner-man, Dr. Hailstone, the President of the Alumni, with a few well chosen remarks, presented Professor Miller as "Toast Master" of the evening. The Professor is never so happy as when presiding on such occasions, and after responding in a humorous strain to the following toast offered by the President: "*Our Alumni banquets*—They should be genuine reunions of all our big Eclectic family, may the last be always the best," he called upon Dr. Hailstone, as President of the Alumni, Prof. Maclean, as Dean of the College, Prof. Van Meter, as representative of the CALIFORNIA MEDICAL JOURNAL, Dr. Mehrmann, as President of the State Society, Prof. Hamilton, on behalf of Eclecticism, and others present to respond to toasts as follows:

Our Alumni Association—Its membership should include every one of our Alma Mater's worthy sons and daughters, may it not only keep alive pleasant memories, but stimulate us to high achievements. Responded to by C. E. Hailstone, M. D., President of the Association.

The Old California—The Mecca of the Pacific Coast Eclectics, may its graduates never forget to make their yearly pilgrimages to its shrine. Prof. Maclean.

Our Journal—The doughty champion of our cause, its success is our success, may it ever be a fearless leader, and have a staunch following that shall number every Eclectic of this coast. Prof. Van Meter.

Our State Society—May its standard of professional excellence ever be high, and its voice and vote in favor of all measures for the improvement of man's condition and environment. H. B. Mehrmann, M. D., President.

Our Alopathic Friends—May Eclectics and Homœopathists by honesty of purpose, professional skill and fairness, continue to heap coals of fire upon their heads until they are roasted to a realizing sense of plain justice, and of the fact, that all men are created free and equal. Prof. Hamilton.

The Man in the Moon—What will he behold at the California Medical College one hundred years from to-night? Dr. Luella Stone.

Eclecticism—There is room on its platform for all the physicians of the world to stand. Prof. Webster.

The Ladies—God bless 'em. With all their faults we love them—still. Prof. Hasset.

The Star Spangled Banner—May it ever symbolize that fundamental principle of American manhood, "Resistance to tyrants is obedience to God." Response, Yankee Doodle by the band.

Lady Physicians—Their scholarly attainments, enthusiasm and success prove their fitness to share with men the duties and honors of the profession. Dr. Jessie C. Farmer.

The Scalpel—A magical instrument for overcoming suffering and danger, may Eclectics ever keep it bright and keen. Prof. Gere.

The Eclectic physician as a citizen. May his upright life, wisdom and public spirit make him an indispensable factor of the commonwealth. Prof. Cornwall.

Our College "sheep-skin."—Designed as a reward for work and worth, may it never be found hiding the gaunt bones of a wolf. Dr. H. Kylberg.

Our Alma Mater.—Kind, loving, cherishing mother! may she ever have the love and gratitude of all her sons and daughters. Dr. J. Liftchild.

Eclecticism in the future.—Scientific in theory, successful in practice, tolerant and progressive in spirit, may it soon become the main reliance of the people for medical knowledge and aid. Prof. Church.

Specific Medication.—The corner stone of Eclecticism, its theories are sustained by science and experience, may its teachings be promulgated to the healing of all nations. Prof. Stetson.

Our Midwinter Fair.—May it be a well improved opportunity of showing to the people, that the Eclectics of our coast are neither dead nor sleeping. Prof. Logan.

Our City and County Medical Society.—May it come to be counted as one of the valued institutions of the community, and be a continued source of inspiration and practical aid to all of its members. Prof. Hunsaker, President.

Our Faculty.—Enthusiastic, patient and conscientious, may the success of our College be commensurate to their efforts. Dr. V. A. Derrick.

After this part of the programme was over, the hall was cleared, the band played, and youth and beauty mingled with age and learning in the dizzy waltz and the intricate mazes of the "Lancers," till the wee, small hours, when they all went home feeling that it was good to have been there; and wishing our College, our Journal, and our Cause, success and prosperity.

BOOK NOTES.

A SYSTEM OF ORGANIC CHEMISTRY. By M. H. Logan, Ph. G., M. D., Professor of Chemistry and Toxicology in the California Medical College of San Francisco. Price, cloth, \$1.00.

This work is designed to meet a want in teaching systematic organic chemistry to students and physicians.

In the light of modern researches into the possibilities of the organic world in the line of medicine, it is necessary for the physician, who wishes to keep abreast of the times, to know something of chemistry. The subject is such a vast one, and the array of symbols and formulæ so complex, that the general student has not the time to devote to the subject that would be required for a thorough understanding, hence a work such as Dr. Logan has prepared will be found of great value. His work is a practical, modern, organic, chemistry, covering the important points of the whole field; so classified and arranged as to give a clear view of the subject. A large number of tables have been carefully arranged for ready reference.

Beginning with the analysis of the carbon compounds, the work is developed in regular steps from the formation of acetylene, by passing an electric spark between the carbon points of a galvanic battery in an atmosphere of hydrogen, to the preparation of the highest organized aromatic bodies. It includes the rarer coal-tar products, as the Naphthols and Sautonine, and the new coal-tar derivatives, Phenacetine, Crevlin, Paraldehyde, Salol, Sulphonal, etc.. Besides the derivatives and preparations of the compounds, their uses are given and, when used medicinally, the therapeutical action and dose are described.

Altogether the work is one which will fill a long felt want, and should receive attention from all physicians interested in this subject, as it cannot fail to please and instruct. Dr. Logan is to be complimented upon the masterly manner in which he has simplified such a complex and almost inexhaustible subject.

SUPPLEMENT TO THE REFERENCE HANDBOOK OF THE MEDICAL SCIENCES. By Various Writers. Illustrated by Chromo-Lithographs and Fine Wood-Engravings. Edited by Albert H. Buck, M. D., New York City. Volume IX. Imperial Octavo, 1084 pages. Cloth, price, \$6.00; sheep, price, \$7.00; half morocco, price, \$8.00. New York: William Wood & Company.

This large, closely-printed, handsome volume, although designed as a supplement to the eight volumes of the Refer-



ence Handbook before issued, is wisely so arranged as to be complete in itself.

In it are not only found the latest advances in medical science, but it is an epitome of the entire fund of medical knowledge brought clear down to date, 1893.

The labors of one hundred and twenty of the best pens of the profession have been required to furnish the vast store of knowledge here gathered.

The work is profusely and beautifully illustrated, and when the busy practitioner refers to his library for the purpose of "reading up" on some puzzling case, if this book be there, he can be sure of finding the best and latest theories and methods concerning the ætiology and treatment of all the ills to which flesh is heir.

THE ERA KEY TO THE U. S. P. The object of this work, as explained by the publishers, is to assist physicians and pharmacists to familiarize themselves with the contents of the new United States Pharmacopœia, also to further the introduction and employment of official drugs and preparations.

This book gives in a very condensed form all the vital information regarding the drugs and preparations of the new Pharmacopœia as follows:—

1. A complete *list* of all drugs and preparations in the new U. S. P.
2. The common *names* and *synonyms* of each drug and preparation.
3. The *parts* employed.
4. The *doses* in both Apothecaries' and Metric Systems.
5. The *preparations* in which the drug is employed.

Particular attention has been paid to the typographical arrangement of the matter. The official names are arranged alphabetically in black faced type, and no less than six styles of type are used in its composition, so as to bring out in marked contrast the important features. The book is in vest pocket size, and certainly of great assistance to physicians in writing prescriptions, and to pharmacists in dispensing the same.

The Era Key was compiled by *The Pharmaceutical Era*, published by D. O. HAYNES & CO., Detroit, Mich., and the price only 25 cts. per copy, post-paid.

THERAPEUTICS OF CHOLERA. (Cholera Asiatica) by P. C. Majumdar, M. D., graduate of Medical College, Calcutta, India; corresponding member of the American Institute of Homœopathy, and Honorary member of the International Hahnemannian Association, etc., Price 50

cents. This is a neat little book of 100 pages, bound in cloth. Published by Boericke & Tafel, No. 1011 Arch Street, Philadelphia.

We are much pleased with the particular get up of this work. It omits the disputed and doubtful questions of various theories as to the etiology of the disease, and its pathological speculations are left out of consideration. The practical points on prevention of cholera, and the means of combatting it when actual invasion takes place, are dealt with in full.

The symptomatic indications, given at the end of the book, are of special interest; as it consists of a grouping of the indicated remedies with each special symptom: which affords a ready reference for the treatment of cholera in its different stages. This alone makes the book exceedingly valuable, as it is well known that no two stages of this disease require, nor will admit of the same treatment. Doctors, send and get it.

LEONARD'S PHYSICIAN'S POCKET DAY-BOOK. Bound in Red Morocco, with Flap, Pocket and Pencil Loop. Price Post-paid, \$1.00. Published Annually by the ILLUSTRATED MEDICAL JOURNAL Co., Dstroit, Mich.

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REACTIONS. A Selection of Organic Chemical Preparations Important to Pharmacy in Regard to their Behavior to Commonly Used Reagents. By F. A. FLUCKIGER, Ph. D., M. D.. Translated, Revised, and Enlarged by J. B. Nagelvoort. Analytical Chemist to the Phar. Chem. Laboratory of Parke, Davis, & Co.

This work is published by George S. Davis, Detroit, Mich. It contains the Chemical Formula and the Reaction of a great number of the newer, and some of the older remedies; and it will be found especially valuable to those who are giving any attention to Medical Chemistry.

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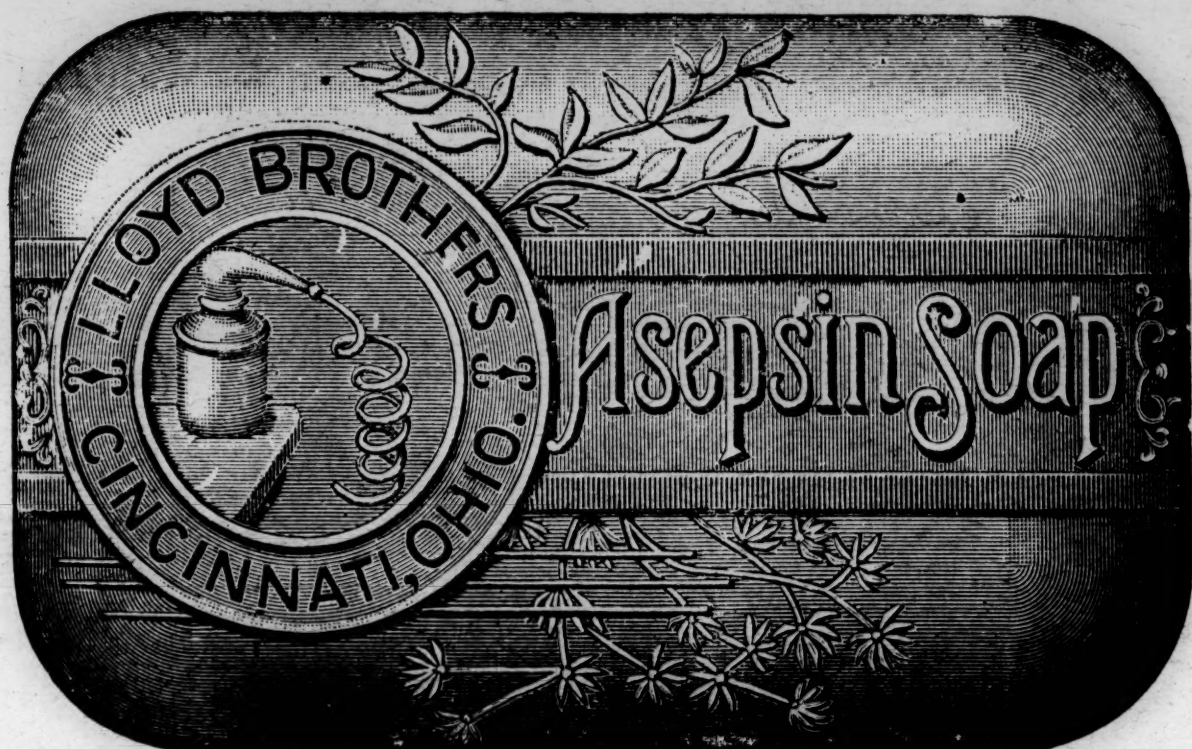
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